

GENDER, RACIAL, ETHNIC, SEXUAL, AND CLASS IDENTITIES

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ABSTRACT

Identity is the individual's psychological relationship to particular social category systems. This chapter summarizes how people create and negotiate their gender, racial, ethnic, sexual, and class identities. Theories, methods, and priorities in each of these content areas differ. However, each systematically excludes particular research participants and thus ignores the complexity of people's multiple social identities. Research suggests that gender, racial, ethnic, sexual, and class identities are fluid, multidimensional, personalized social constructions that reflect the individual's current context and sociohistorical cohort. However, far too little empirical work captures the richly textured, theoretical conceptions of identity development, maintenance, and change. Innovative methods for assessing the content and structure of people's identities now exist. Future research should include groups other than young children or college students; should explore functions of identity other than just self-esteem, adjustment, or well-being; and should implement methodologies that are longitudinal and that assess people's many social identities.

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INTRODUCTION

This chapter summarizes how people create and negotiate their gender, racial, ethnic, sexual, and class identities. Identity is the individual's psychological relationship to these social category systems (Sherif 1982). Identity is a unified, purposeful aspect of self and hence is only part of the self-concept (McAdams 1995). Identity is also the term most often invoked by those who struggle to create meaning and purpose when culturally significant, ideologically powerful social category systems clash with personal and collective group member experiences (Tajfel 1978).

New in the study of identity is an emerging willingness by psychologists to emphasize in their empirical work the cultural categories that matter, i.e. the ones that we all pay attention to in our daily lives (e.g. Deaux et al 1995). Also new is a concomitant willingness to attend to the personal meanings of these culturally weighted categories, to understand how these meanings reflect historical events and cultural codes, and to study how these meanings interact with specific situations for individuals (e.g. Hurtado et al 1994, Kitlinger & Wilkinson 1995, Stewart & Ostrove 1993, Waters 1994). Also new is the empowerment of disenfranchised category members; by writing about the diverse experiences of being "Other," they translate these experiences into a new inclusive paradigm (Trickett et al 1994).

By putting the gender, racial, ethnic, sexual, and class identity literatures together in a single review, I hope that the theories, methods, and priorities of each area might inform the others. The review is necessarily eclectic. Previous *Annual Review of Psychology* chapters supplement the material presented here (Banaji & Prentice 1994, Porter & Washington 1993, Shweder & Sullivan 1993, Waters & Eschbach 1995).

GENDER IDENTITIES

While gender identity always involves an individual's relationship to gender as a social category, it carries a different spin in each of psychology's subspecialty literatures. Traditionally, gender identity fell into the domain of medicine; it referred to the individual's psychological sense of being male or female (exact definitions vary; see Fagot & Leinbach 1985, Money 1994). This particular construct is useful for studying the origin of gender identity. Research assesses the psychological gender of children who are born with inconsistent biological sex markers and then assigned to the male or female category. Early work suggested that the child's sex of assignment or rearing environment is the most potent predictor of gender identity and that this gender identity cannot be easily changed after the age of two and a half (Money & Ehrhardt 1972). Two observations challenged this conclusion. The well-known MZ twin—a

biological male with a masculine pattern of prenatal hormones who was accidentally castrated at birth, was assigned the female gender role, and exhibited “perfect” childhood femininity—began to question her gender identity during adolescence (Diamond 1982). In the Dominican Republic, 16 of 18 genetic males—assigned the female gender role at birth because of their feminine-appearing external genitalia—adopted a male gender identity at puberty when testosterone masculinized their external genitalia (Imperato-McGinley et al 1979). Theorists and researchers now acknowledge that biology does influence the gender identity process (minimally, by making a particular body for which cultures have expectations), and they attribute more plasticity to people’s gender identities (Bem 1993, Herdt 1990).

In the modern psychiatric and clinical psychology literature, gender identity first appeared with the publication of the third *Diagnostic and Statistical Manual* in 1980. Today, gender identity disorders are characterized by “strong and persistent cross-gender identification accompanied by persistent discomfort with one’s assigned sex” (American Psychiatric Association 1994, p. 493). Three diagnoses are possible: gender identity disorder in children, gender identity disorder in adolescents or adults, and gender identity disorder not otherwise specified. People with inconsistent biological sex markers (e.g. androgen insensitivity syndrome, congenital adrenal hyperplasia) are limited to the last diagnosis. The first two differ only by the age of the individual. Boys are more likely than girls to be referred for psychiatric help (5:1), and most children with a childhood diagnosis do not carry it to adulthood. Although the *DSM-IV* manual states that no gender identity disorder test exists (pp. 537–38 for diagnostic criteria), the literature does offer a 12-item gender identity interview for children (Zucker et al 1993a), the Feminine Gender Identity Scale for adult men (Freund et al 1974), and the Masculine Gender Identity Scale for adult women (Blanchard & Freund 1983). Reviews of sex reassignment surgery outcomes are available (Green & Fleming 1990), as are social critiques of the medical establishment’s insistence on the gender dichotomy (Eichler 1983). Behavior change programs for diagnosed children may relieve a child’s personal distress from social ostracism (Green 1987), but they also enforce gender conformity (Bem 1993). Boys with a childhood diagnosis are more likely to report a homosexual or bisexual orientation in adulthood than controls (Bailey & Zucker 1995, Green 1987), they may be more physically attractive (Green et al 1985, Zucker et al 1993b), and they may have more male siblings and a later birth order (Blanchard et al 1995). In all this work, diagnostic and assessment advances far exceed those in research etiology and treatment outcome studies.

In the developmental literature, psychologists focus on the usual path by which children become psychological males and females. With respect to

gender identity, Lawrence Kohlberg remains the most influential theorist (Maccoby 1990). He defines gender identity as the “cognitive self-categorization as ‘boy’ or ‘girl’” (Kohlberg 1966, p. 88) and proposes a three-step acquisition process: First, the child learns to label the self and others accurately (gender identity); second, the child learns that boys become men and girls become women (gender stability); and finally, the child learns that being male or female is permanent and not changed by cultural gender cues (gender constancy). Unfortunately, his use of the term gender identity is ambiguous (Fagot & Leinbach 1985). Others suggest that children’s gender understanding includes four tasks: identifying the self and others correctly (labeling), then understanding that identity continues over time (stability) and that identity is not changed by wishes (motive), and finally recognizing identity’s permanence despite hairstyle or clothing changes (constancy) (Eaton & Von Bargen 1981). Considerable research supports either developmental sequence, although reported age ranges vary enormously (Huston 1983). Critiques of constancy measures exist: The interview questions are open to multiple interpretations; the child’s ability to conserve is not always tested (i.e. they never see a perceptual transformation); the pictorial stimuli are often schematic drawings and hence artificial; and, perhaps most importantly, biological knowledge (presumably, the essence on which constancy is based) is simply not assessed (Bem 1989, Martin & Halverson 1983). Sandra Bem (1989) proposed a new measure that uses photographs of real children to pit biological sex against cultural gender, and she found that much younger children (40% of three-, four-, and five-year-olds) are gender constant, but only if they know that genitalia are the defining attributes of male and female. Although gender inference tasks differentially challenge children’s competence (Gelman et al 1986), children are also more competent than typical constancy procedures suggest.

Gender constancy, while only one component of gender identity, is a focus in the literature because Kohlberg (1966) proposes that children use gender to organize their behaviors only when they are “categorically certain of its unchangeability” (p. 95). In contrast, Huston (1983) found gender constancy to be remarkably independent of other components of gender-related behaviors, and recent research concurs. Gender constancy is unrelated to sex-typed toy choice (Carter & Levy 1988, Downs & Langlois 1988, Emmerich & Shepard 1984, Levy & Carter 1989, Lobel & Menashri 1993; for exceptions, see Stangor & Ruble 1989), to the imitation of same gender models (Bussey & Bandura 1984), to the correct attributions of stereotypes to male and female figures (Levy & Carter 1989), to measures of gender schematic processing (Levy & Carter 1989), to attitudes toward boys and girls (Yee & Brown 1994), and to gender discrimination in reward allocation (Yee & Brown 1994). Perhaps constancy measures are faulty (Bem 1989). Perhaps a weaker version of

Kohlberg's hypothesis is more appropriate (Maccoby 1990, Stangor & Ruble 1987) and in line with gender schema theories. Or perhaps gender is a multidimensional construct in children's development, and gender-related cognitions and behaviors do not always go together (Downs & Langlois 1988, Hort et al 1991, Huston 1983). The latter view is supported by the work of Beverly Fagot and Mary Leinbach, who focus on gender labeling rather than on gender constancy (Leinbach & Fagot 1986). Boys and girls who pass their gender labeling test are more likely to play with same-sex peers; girls who use the labels accurately are less aggressive than girls who had not yet mastered the labels (Fagot et al 1986). Labelers are more knowledgeable about sex stereotypes; they exhibit more sex-typed behavior at 27 months; their parents give them more positive and negative feedback to sex-typed toy play; and their parents have more traditional attitudes toward women, sexuality, and family roles (Fagot & Leinbach 1989, Fagot et al 1992). These results suggest a certain coherence among environmental inputs (parents), gender labeling, gender knowledge, and gender behaviors, but longitudinal and cross-sectional studies also underscore the multidimensional nature of gender and a complex pattern in development.

After early childhood, gender identity development almost disappears from the developmental literature, with two exceptions. Phyllis Katz (1986) proposed a model of gender identity development with four milestone events: gender labeling, gender constancy, sexual gender (puberty), and reproductive gender (adulthood). Here, gender identity is the individual's "internal awareness and experience of gender" (p. 25). No one has tested the model, but Katz's suggestion that milestone events require elaborations and changes of the individual's gender identity is worth pursuing. Researchers also examine the influence of gender on identity within Erik Erikson's developmental theory (1968) as operationalized by John Marcia (1980). Few gender differences exist with respect to ego identity status, identity formation (e.g. timing or salient domains), or identity meaning, but women are less likely than men to exhibit a sequential identity-intimacy pattern, and women may be more mature in interpersonal domains (Marcia et al 1993). Related work considers the importance of identity statuses during women's adulthood (Josselson 1987) and demonstrates how sociohistorical events mediate the relation between ego identity and outcomes for women (Helson et al 1995).

The literature in social and personality psychology is heavily influenced by the failure of the gender differences and the gender-as-a-personality-variable paradigms to explain all gender-related phenomena. Gender is now understood as a social category (Deaux & Major 1987), and gender identity has finally emerged as a construct of interest. Janet Spence (1985) defines gender identity as a "fundamental existential sense of one's maleness or femaleness" and a

“primitive, unarticulated concept of self, initially laid down at an essentially preverbal stage of development and maintained at an un verbalized level” (pp. 79–80). Gender identity guides the early acquisition of gender-congruent behaviors, but once established, it is simply protected by doing enough of your own sex’s stuff. Thus, gendered traits, attributes, values, interests, preferences, and behaviors hang together with the weakest of glues (Spence 1993). Spence’s model is consistent with the litter of BSRI and PAQ studies (for an alternative perspective, see Frable 1989). It may also be consistent with the developmental literature’s hint that very young children are of particular interest in studying gender acquisition. What is less clear is how to measure this primitive, unarticulated sense of self and what hypotheses should then be tested.

A second definition of gender identity also suggests that the self-system is an essential construct for studying individual gender psychology (Sherif 1982). Richard Ashmore (1990) defines gender identity as “the structured set of gendered personal identities that results when the individual takes the social construction of gender and the biological ‘facts’ of sex and incorporates them into an overall self-concept” (p. 512). Gender identity includes personal and social attributes, social relationships, interests and abilities, symbolic and stylistic behaviors, and biological/physical/material attributes. An individual’s gender identity is separate from his or her sex stereotypes and gender attitudes. Ashmore’s model is particularly useful in delineating all possible components of the individual’s gender psychology. Moreover, relations among many components can be studied via currently existing measures of traits, behaviors, and ideology. New measures need to be created, and relations among components must be assessed. The model does not clearly specify which components should be related and why. The usefulness of the gender multiplicity model is seen easily in the empirical work of Richard Koestner and Jennifer Aube (1995).

Three other notions of gender identity exist in social psychology. First, for social identity theorists (Tajfel & Turner 1979, Turner et al 1987), gender identity is men’s and women’s awareness of and feelings for their gender category. Gurin & Townsend (1986) measured three properties of women’s gender identity and showed that each property has a different relation to gender ideology (Gurin & Markus 1989). Other researchers focus on how context makes gender categories salient, increases gender identification, and may lead to traditional attitudes and behaviors (Abrams et al 1985, 1990). Second, for symbolic interactionists (McCall & Simmons 1966; Stryker 1980, 1987), gender identity refers to people’s self-conceptions that are based on the particular gender roles they play. Recent work suggests few differences with respect to these gender identities (Thoits 1995; for another view, see Simon

1992). Other work proposes an innovative methodology for assessing gender identity (Burke & Tully 1977). Finally, for social constructionists, gender identity is created from structured, social constraints. Robin Leidner (1991) showed how distinct gender identities are created in two interactive service jobs that require the exact same skills but have different training emphases. Robin Ely (1995) demonstrated how the number of "allowable" gender identities for junior women in law firms varies with the number of senior female partners present.

In all of psychology's subspeciality literatures (e.g. clinical, developmental, social-personality), the acquisition of gender identity is relatively free of personal conflict (for an exception, see Frey & Ruble 1992). Some individuals, however, reject the existing social category system of gender, choose to revise their relationship to it, and in essence redefine their gender identity. Two models of this revision process exist: One describes the development of a feminist identity (Downing & Roush 1985; for measures, see Bargad & Hyde 1991, Rickard 1987; for validity, see Henderson-King & Stewart 1994, Rickard 1990), the other describes moving from external gender standards to internal ones (Ossana et al 1992).

RACIAL AND ETHNIC IDENTITIES

The racial and ethnic demographics of the United States are shifting rapidly. According to the US Bureau of the Census (1996), by 2050, the US population will be 53% European American, 25% Hispanic or Latino American (Mexican, Puerto Rican, Cuban, Central and South American), 14% African American (African-Caribbean, African immigrant), 8% Asian American (Chinese, Japanese, Korean, Vietnamese, Cambodian, Thai, Filipino), and 1% Native American (Cherokee, Navajo, Sioux, Chippewa, Aleuts, Inuit). Current values are 74, 10, 12, 3, and 1, respectively (US Bureau of the Census 1996). In addition, although not evident in the Census, a growing portion of the population classify themselves as biracial or biethnic (Root 1992). The assimilation or melting pot metaphor of US immigration is passé, replaced by the image of a multicultural "salad bowl" in which people are at least biculturally competent (Cross 1991, Harrison et al 1990, LaFromboise, Coleman & Gerton 1993, Phinney & Rotheram 1987, Ramirez 1983). In this new emphasis on human diversity, one of the unifying concepts is that of identity (Sampson 1993, Trickett et al 1994).

Race is used by social scientists to refer to distinctions drawn from physical appearance (skin color, eye shape, physiognomy), and ethnicity is used to refer to distinctions based on national origin, language, religion, food, and other cultural markers. Race has a quasi-biological status (Zuckerman 1990), and among psychologists, the use of race terminology is hotly debated (Betancourt

& Lopez 1993, Yee et al 1993). In the United States, race is also a socially defined, politically oppressive categorization scheme that individuals must negotiate while creating their identities (Helms 1994). National perception, however incorrect, is that four distinguishable racial groups exist: Asian, black, white, and Native American; Latino is often treated as a fifth racial group, although it exhibits all "racial" characteristics of the other four (Helms 1994). The racial and ethnic identity terms are often used inappropriately in psychology. While black immigrants to the United States may have a racial identity as black, their ethnic identity reflects their country of origin; racial identity is much more likely to be problematic in the United States than ethnic identity. Whether a researcher assesses racial identity, ethnic identity, or some combination may only be clear after reading the Methods section of their report. The identity studies I reference here are those in which researchers assess participants' subjective perceptions or internal representations of their racial or ethnic groups; I exclude studies that use racial or ethnic group merely as a nominal classification scheme.

In the developmental literature, some conceptual clarity exists about how racial and ethnic identities are measured in children and how the data may be interpreted (Aboud 1987, Katz 1987, Spencer & Markstrom-Adams 1990). Two lines of work stand out as particularly scholarly. First, William Cross's book *Shades of Black: Diversity in African-American Identity* (1991) summarizes the results of 181 empirical studies on black identity. Of the 45 studies (most based on children) that assess both reference group orientation (e.g. race awareness, race esteem, race ideology) and personal identity self-concept (e.g. self-esteem, self-worth, self-confidence), 37 found no relation between the two constructs. Furthermore, the reference group orientation studies suggest that whereas black children's preferences have changed from white (1939–1960) to black (1968–1980), they actually exhibit a bicultural appreciation pattern (Cross 1991). Second, Martha Bernal, George Knight, and their colleagues (Bernal et al 1990) creatively but systematically measured the multiple components of ethnic identity (ethnic self-identification, ethnic constancy, ethnic role behaviors, ethnic knowledge, and ethnic preferences) among Mexican-American children. In contrast with previous research, they assess self-identification by means of many measures, and their measures intercorrelate. Children's performance on each ethnic identity component is positively related to age and to the use of Spanish in the home. Other studies link family socialization practices (teaching about Mexican culture, teaching about ethnic pride, having Mexican objects in the home) to the child's development of a Mexican-American identity; this identity predicts the child's display of a cooperative and culturally specific behavioral style (Knight et al 1993a,b). The child development literature is now characterized by an insistence that the racial and ethnic

identities of nonwhite children be understood in their own terms. Within-group differences are particularly important; when measured, white children's responses are no longer treated as the standard from which responses of others deviate.

With respect to adolescents and adults, Jean Phinney reviewed 70 empirical articles in the literature from 1972 to 1989 in a *Psychological Bulletin* paper (1990; see also Spencer & Markstrom-Adams 1990). Phinney noted the inconsistent use of the ethnic identity term: Some authors mean self-identification (self-definition, self-labeling), others emphasize attitudes and feelings (group belonging, commitment, and pride), and yet others stress cultural aspects (knowledge of ethnic language, behavior, and values; involvement with group members and practices). Results from the 70 studies are inconsistent with respect to relations among ethnic identity components and whether ethnic identity relates to self-esteem and adjustment. Phinney concluded that the most pressing issues are the lack of reliable and valid measures of ethnic identity (especially those that can be used for all ethnic groups), experimental and longitudinal studies (most are descriptive or correlational), accurate measurement of ethnic heritage, and inclusion of contextual variables (particularly socioeconomic status). These issues remain current concerns.

Three theoretical frameworks dominate the adolescent and adult literature: identity development (Erikson 1968), social identity theory (Tajfel & Turner 1979), and acculturation theory (Park 1928, Stonequist 1937). Within identity development, the most richly textured, influential description of racial identity continues to be Cross's (1971) black identity model (1991; see also Helms 1990, 1994; Parham 1989), which was created to explain particular identity changes among African Americans within the Black Social Movement from 1968 to 1975. Models exist for Asian Americans (Kim 1981), Latinos (Keefe & Padilla 1987), European or white ethnic groups (Helms 1990, Ponterotto 1988), biracial people (Poston 1990), and ethnic minorities in general (Atkinson et al 1989, Phinney 1989). Individuals usually begin with an unexamined racial or ethnic identity (this identity may be devalued, denied, or simply not salient). The individual is then challenged by experiences that make race or ethnicity personally problematic. To resolve the conflict, the individuals initiate an exploration of their racial or ethnic identity, immersing themselves in a culture specific to their race or ethnicity. This search leads individuals to value their racial, ethnic, or minority group membership and integrate it with other identities (e.g. ethnicity may become the most important identity or one of several salient identities). Theory suggests that this developmental cycle reoccurs during the lifespan (Parham 1989), and "stages" may be better understood as ego statuses that, once differentiated, are world views for handling racial and ethnic information (Helms 1994). Critiques exist: Some models reflect a

particular sociohistorical framework, treat individuals as passively reacting to environmental events, or assume Eurocentricity; other models are not systematically developed or empirically tested (Sue 1994). Only one model accounts for multiple group memberships (Myers et al 1991).

Research within this identity development theory has two dominant lines. First, empirical work based on Cross's black identity model suggests that nigrescence (i.e. the process of becoming black) changes reference group orientation variables (e.g. racial self-image, attitudes toward other blacks, types of organizational memberships, and racial frames of reference) from low to high salience, apolitical to political, and Eurocentric to Afrocentric (Cross 1991, Cross et al 1996). Unfortunately, researchers also continue to correlate reference group orientation (racial identity attitudes) with "personal identity self concept" (self-esteem, well-being, and adjustment), documenting negative to positive shifts (Carter 1991, Munford 1994, Pyant & Yanico 1991; for an explanation, see Cross 1991). Other empirical work reflects narrowly focused dependent variables of interest primarily to counseling psychologists (e.g. attitudes toward counseling, preference for counselor's race). Suggestions do exist for expanding the focus, method, and measurement of this research area (Helms 1989, Ponterotto 1989, Ponterotto & Wise 1987). Examples include white racial identity development (Rowe et al 1994) and the relation between family ethnic socialization and children's racial identity attitudes (Sanders 1994).

The second body of research is based on Phinney's model of ethnic identity development, which purports to capture identity development for all ethnic groups (1989). Her 14-item Multigroup Ethnic Identity questionnaire assesses three common components of ethnic identity: positive ethnic attitudes and a sense of belonging, ethnic identity achievement, and ethnic behaviors and practices (Phinney 1992). Phinney's inclusion of adolescents is noteworthy. Her data suggest that blacks, Hispanics, and Asian Americans perceive ethnic identity as more important than whites do (Phinney 1989, Phinney & Alipuria 1990; see also Crocker et al 1994). Cross-sectional and longitudinal interview and questionnaire studies support a developmental progression (Phinney 1989, 1992; Phinney & Chavira 1992; Phinney & Tarver 1988). Ethnic identity achievement is associated with self-esteem and adjustment. However, the role of self-esteem as an outcome or precursor variable and its relation to other ethnic identity components remains unclear (Phinney 1989, 1991; Phinney & Alipuria 1990; Phinney & Chavira 1992).

With respect to social identity theory, identity studies that assess individuals' group perceptions are sparse (particularly those with American racial and ethnic groups), but several are exemplary. Taking a sociohistorical perspective, Hurtado et al (1994) showed that Chicanos (second or later generation)

have a more differentiated identity structure than Mexicanos (first generation immigrants). The identity content for Chicanos reflects a cultural adaptation to the United States; content for Mexicanos reflects a homeward focus or Latin American consciousness. Retainment of Mexican culture among Chicanos is positively related to a Raza political identity and negatively associated with a US middle-class identity; cultural retainment among Mexicanos is only predicted by a working-class identity. The paper makes multiple points: Ethnicity as a social identity is multidimensional; social histories influence identity structure and content; and these complexities need to be included in empirical work. The method of measuring identity structure and the lack of concern with self-esteem variables are admirable. Using a longitudinal design (much needed in this literature), Ethier & Deaux (1994) examined how Hispanic students maintain their ethnic group identification during their first year at Anglo universities. Students' ethnic identities are initially associated with the strength of their cultural background; over time that link weakens, and students support or "reembrace" their ethnic identity with culturally relevant activities at school. Students from strong cultural backgrounds become involved in activities that strengthen their ethnic group identification; students without such backgrounds perceive college as more threatening, which then predicts less favorable ethnic group perceptions and, ultimately, lower group identification. In sum, ethnic identity is supported by environmental structures (cultural background); its fluidity is visible across changing contexts (home to school); and identity negotiation takes multiple forms (varying with the importance of the identity to the individual).

Within the acculturation theory literature, two identity models exist. The linear model suggests that as individuals strengthen their identity in the new culture, they weaken their identity in the original culture (the melting pot). The two-dimensional model suggests that the individual's ties to the original culture and to the new culture are independent dimensions (the salad bowl). One option here is to have strong ties to both cultures, and such biculturalism is the current zeitgeist (Ramirez 1984, Szapocznik & Kurtines 1980). Components of bicultural competence are proposed (LaFromboise et al 1993), and by using identity and behavior as separate dimensions, various bicultural styles can be described (Birman 1994). Some research asks participants to choose reference group labels (e.g. ethnically identified, bicultural, mainstream identified) and then finds logical relations between label choice and acculturation attitudes (Rotheram-Borus 1990). Other work asks participants to complete acculturation measures in which identity and ethnic pride constitute one component. Some studies show that ethnic identity and pride remain high across generations, whereas ethnic knowledge and cultural practices decrease (Keefe & Padilla 1987). Others show that acculturation is associated with positive atti-

tudes toward mental health services (Atkinson & Gim 1989). Empirical work lags behind theory.

In sum, racial and ethnic identities are fluid and multidimensional (Nagel 1994, Padilla 1993). Similarities emerge in how these identities “work,” but their structure and content differ for each group as do their behavioral implications (Hurtado et al 1994, Jones 1994, Keefe 1992). New methods for measuring these identities exist (Apollon & Waters 1990, Deaux 1993, Hurtado et al 1994, Luhtanen & Crocker 1992, Phinney 1989), and researchers must be sensitive to assessment issues (Okazaki & Sue 1995). More research is needed with respect to Asian Americans, Native Americans, and those of mixed heritages; longitudinal research designs are essential.

SEXUAL IDENTITIES

In the nineteenth century, the idea appeared that homosexual behavior made a particular kind of person; homosexuality, in essence, defined an individual's identity, and this identity was labeled as a sickness (D'Emilio & Freedman 1988, Faderman 1981, Foucault 1979). Today, political movements offer alternatives to this rigid, negative construct. The gay rights movement, the feminist movement, and the bisexual movement support many identities: oppressed minority member, gay rights activist, woman-identified-woman, gay community member, bisexual feminist, etc (D'Emilio 1983, Herdt 1989, Radicalesbians 1973, Weise 1992). This historical background suggests that sexual identity is fluid (Garnets & Kimmel 1993) and is created by individuals (Brown 1989), communities (Bayer 1987, Krieger 1983), and sociohistorical events (D'Emilio 1983, Golden 1994).

The most affirmative descriptions of gay identity are developmental stage models (Cass 1979, 1984; Chapman & Brannock 1987; Troiden 1989; for a review of biological and psychodynamic models, see Brown 1995). Two models are theoretically grounded, empirically tested, and reasonably detailed. First, working within interpersonal congruency theory, Vivienne Cass (1979, 1984) proposed six progressive stages of positive gay identity development: identity confusion, identity comparison, identity tolerance, identity acceptance, identity pride, and identity synthesis. Cass (1984) created a self-report questionnaire to measure the characteristic emotions, cognitions, and behaviors of both men and women for each stage. Discriminant analysis distinguishes among her six hypothesized groups, and profile analyses provide validity for the questionnaire. Working with Cass's model, Brady & Busse (1994) created the Gay Identity Questionnaire to measure the six stages more easily. Their results suggest a sharp distinction in psychological well-being between subjects in the identity tolerance stage and those in the identity acceptance, pride, and synthesis stages. The identity acceptance group was

also less likely to have “come out” than the identity pride and synthesis groups. With the caveat that women subjects were not included, these results are consistent with Cass’s model (1979, 1984).

In the second model, working within symbolic interactionist theory, Richard Troiden (1989) synthesized various identity models (including Cass’s) into four stages: sensitization, identity confusion, identity assumption, and commitment. Sensitization (“generalized feelings of marginality and perceptions of being different from same-sex peers”) occurs before adolescence (Troiden 1989, p. 50). Identity confusion occurs in adolescence when individuals realize that their feelings, thoughts, and behaviors might be labeled homosexual. Identity assumption means that the individual believes that he or she is gay and begins to present the self as gay. Finally, commitment means the individual has accepted being gay as a way of life and is happy with that identity and role. Empirical support for this model comes from comparisons between homosexuals and heterosexuals (Bell et al 1981). For example, with respect to sensitization, 72% of homosexual males and 72% of lesbians said they felt “very much or somewhat” different from same-sex peers in grade school compared with only 39% of heterosexual males and 54% of heterosexual females (Bell et al 1981). Similarly, with respect to identity confusion, empirical data suggest that gay men and women are more likely than their heterosexual peers to experience both heterosexual and homosexual arousal (Bell et al 1981). Other support for the model comes from the modal ages for “milestone events” (Garnets & Kimmel 1993). Gay men and lesbians appear to require several years to move from same-gender feelings (identity confusion) to gay self-identification (identity assumption) to positive gay identity (commitment).

The stage models can be critiqued. First, most models are atheoretical; they describe ideal types averaged from the narratives of gay men, lesbians, and bisexual people. Gay affirmative research needed such descriptions because the heterosexist bias in psychology is well documented (Morin 1977, Morin & Rothblum 1991). Now that the descriptions exist, the work can be integrated into mainstream personality, self, and identity theory (Coyle 1992, Gonsiorek & Rudolph 1990). Second, most models make questionable assumptions: People progress linearly through stages (Rust 1993, Sophie 1985/1986), people are discovering their true selves (Chapman & Brannock 1987, Kitzinger & Wilkinson 1995), or people should self-disclose to ever-widening audiences (Cain 1991). The models may describe one route to positive gay identity (e.g. that of a gay male activist), but they neither describe all routes (Faderman 1984) nor capture the fluidity of sexual identity (Golden 1987). Third, most models are based on gay male respondents. Sexual identity development in women is different (Brown 1995, Gonsiorek 1995, Risman & Schwartz 1988): Women self-identify as gay or bisexual later than men do (Garnets & Kimmel

1993), women more often self-identify in the context of emotional-romantic relationships (Sears 1989), and women less often subscribe to the essentialist perspective about sexual orientation (Chapman & Brannock 1987). Alternative models for women are available (McCarn & Fassinger 1996), but they are often hidden in unpublished doctoral dissertations. Fourth, the models focus on adolescence and early adulthood (Patterson 1995); they miss identity changes that occur later in life (Kitzinger & Wilkinson 1995) and “repeating spiral patterns” of identity development (Garnets & Kimmel 1993, p. 15). Fifth, these models classify people as gay, lesbian, bisexual, or heterosexual according to self-identification, and this procedure does not include some people (Bem 1992). Reliance on self-identification also masks the multiple components of sexual orientation (Coleman 1987, Klein et al 1985) and with concealable populations may produce contradictory results based on participant selection procedures (e.g. self-identification vs sexual behavior vs community participation) (Rothblum 1994). Sixth, these models are based on cross-sectional studies that use retrospective self-report data. Such data overestimate consistencies (within and across individuals) and do not establish causal connections; prospective, longitudinal data are needed.

Taken together, developmental stage models propose testable links among positive gay identity, personal visibility, cultural stigma, gay community networks, and mental health. Positive gay identity is the critical construct, and it is typically measured by asking people how good they feel about their homosexuality and how willing they are to change it (Bell et al 1981). As expected, having a positive gay identity is associated with better mental health (e.g. McDonald 1982, Miranda & Storms 1989, Schmitt & Kurdek 1987, Walters & Simoni 1993). The stage models also suggest and empirical research supports the view that increased gay community participation (Bell & Weinberg 1978, McDonald 1982), increased personal visibility or self-disclosure (Bell & Weinberg 1978, Bradford & Ryan 1987, McDonald 1982, Miranda & Storms 1989), and fewer cultural stigma experiences (Hetrick & Martin 1987) are associated with having a positive gay identity. Some research also suggests that increased community participation (Harry & DeVall 1978, Kurdek 1988), increased personal visibility (Friend 1980, Schmitt & Kurdek 1987), and fewer cultural stigma experiences (Ross 1990) are associated with better mental health. Studies often have limited sample sizes or restricted age ranges, most report only frequency counts or simple correlations, most do not assess the direct relation between variables while controlling for the other aspects of daily gay life, and none calculate the total effect of one variable on another. Getting large sample sizes, measuring all aspects of daily gay life, and using sophisticated analyses are critical for creating viable, empirical models of positive gay identity (Frable et al 1996).

The stage models also include a rich description of strategies that people use to negotiate the social category scheme of sexuality. At the identity confusion stage, people may deny, repair, avoid, redefine, or accept their homosexual behavior (Cass 1979, Troiden 1989). At the identity assumption stage, people may evade social stigma by capitulation (avoiding homosexuality), minstrelization (playing stereotypes), passing (concealing homosexual status), or group alignment (immersion in the gay community) (Troiden 1989). At the identity commitment stage, people may manage social stigma by covering, blending, or conversion (Troiden 1989). However, empirical research associating identity stages with management strategies is not substantial, the evaluative connotations implicit in the discussion of these strategies is problematic, the list of strategies is incomplete, and alternative conceptualizations of this identity negotiation process exist. For example, de Monteflores (1986) conceptualizes the issue as acceptance/rejection of the dominant culture; she proposes that gay individuals manage difference using assimilation, confrontation, ghettoization, and specialization. Wood (1992) found that strategies vary with an individual's work context; the choice of gay male professionals to counterfeit a heterosexual identity, avoid sexual identity questions, or integrate their gay identity in the work place is predicted by economic vulnerability, role models, and workplace homophobia. How gay men, lesbians, and bisexual people manage information about their gay identity, how they negotiate social interactions once their identity is known, and what the precursors and consequences of various strategies are all need systematic empirical attention. To distinguish the effects between sexual orientation and cultural stigma, cohort differences should also be explored.

Many of the first critiques of the stage models cited above are made by authors describing lesbian identity development (Faderman 1984, Sophie 1985/1986). The second wave of critiques comes from those describing bisexual identity development (Fox 1995). In contrast with the "in transition" or "denial" stereotypes (Ochs 1996), Cass (1990) suggested that bisexuality is a viable sexual identity with its own developmental pathway. Empirical data agree: Bisexuals self-identify later than lesbians and gay men (Rust 1993, Weinberg et al 1994), bisexuals have less stable identity histories (Rust 1993, Weinberg et al 1994), and bisexuality is less likely than homosexuality to be tied to preadult sexual feelings (Bell et al 1981). A bisexual identity is increasingly visible and carries social acknowledgment and community support (Garber 1995, Hutchins & Kaahumananu 1991); it challenges the premise that sexual feelings and behaviors revolve around the dimension of gender of partner. A third wave of critiques comes from the experiences of African Americans (Loiacano 1989), Asian Americans (Chan 1995), Native Americans (Williams 1986), and Latino Americans (Espin 1995). Investigators question whether

Western models of sexual identity are applicable to members of non-Western cultures (Greene 1994), and alternative models are proposed (Morales 1989).

Throughout the sexual identities literature, sexual identity is a political statement and not just information about self-perception. “Homosexual identity” evolved into “gay and lesbian identity,” creating group cohesion and identity politics (Phelan 1993, Sampson 1993). Sexual identity theory is now on the cutting edge of understanding the intersection of identity, sociohistorical forces, cultural diversity, and individual lives.

CLASS IDENTITIES

Psychologists use class two ways: to describe research participants (often with the ubiquitous phrase “most subjects were white and middle class”) and as an independent variable (to control uninteresting variation or to show that class does not interact with “more important” constructs). With few exceptions, class as a meaningful identity is simply absent from the psychological literature.

Among the exceptions, class identity often becomes salient when the individual moves from one context to another. Students from working-class backgrounds negotiate their marginal status at elite academic institutions (Stewart & Ostrove 1993). Downwardly mobile divorced women must reconcile a lower-class economic reality with their past middle-class lives (Grella 1990). Second- and third-generation immigrants are more likely than their first-generation peers to have class identities reflecting US cultural conceptions (Hurtado et al 1994). Poor women who clean wealthy women’s houses don the masks of deference as they cross neighborhoods (Collins 1991). These works focus on handling stigma, reconciling contradictions, and resisting, capitulating, or accommodating to class-based norms.

Quantitative reports are rare. Hurtado et al (1994) found that Chicanos (second and third generation) have more class identities (reflecting their dual US and Mexican heritages) than Mexicanos (first generation). Stewart & Ostrove (1993) found that women from working-class backgrounds who graduated from Radcliffe in 1964 were less likely than their middle- and upper-class classmates to be homemakers and have children in 1979; these women’s narratives indicate that their class identities allowed them to resist middle-class norms.

MULTIPLE IDENTITIES—SEEING PEOPLE AS WHOLE

This chapter reflects the current identity literature in psychology with respect to gender, race, ethnicity, sexuality, and class. Research focuses on the personal meanings of these social categories one at a time. This practice frag-

ments the literature and systematically excludes particular populations. Gender identity research excludes racial and ethnic minorities and those who are not middle class. Racial and ethnic identity research often avoids gender and sexuality. Sexual identity research focuses on white middle-class gay men and lesbians. Class identity research attends to the wealthy (usually white) or the poor (usually women and ethnic minorities). Critiques of these practices exist, but even when new research with previously excluded social groups contradicts traditional theory, it rarely leads to new theoretical conceptions. Even more unusual is the actual testing of any new theoretical conceptions that reflect dual or multiple social group memberships.

Currently, longitudinal research is rare; such designs are essential to test developmental theories, to follow identity paths, and to demonstrate fluidity. In addition, self-esteem, adjustment, and other well-being indices are over-worked dependent variables; identity has other functions needing exploration. Innovative methods for assessing the content and structure of people's identities now exist; they were designed or can be adapted to assess the many personally meaningful social categories on which people base their identities. The empirical work that stands out in this literature acknowledges that the personal meanings of social group memberships change over time, and these meanings are best understood in the context of sociohistorical events. Work that is produced without taking this context into account can be nonsensical, trite, or harmful; such work usually applies as normative a white, middle-class standard.

A powerful vision of what empirical work on identity could look like exists in the narrative writings of feminists, particularly those who are women of color (Collins 1991, Comas-Diaz & Greene 1994, Heath & McLaughlin 1993, Hurtado 1989, King 1988, MacPherson & Fine 1995, Reid 1994). These accounts capture excluded groups, excluded dimensions, and excluded relationships. They attend to sociohistorical contexts, family niches, and on-going milieus. They see identity as a continuously re-created, personalized social construction that includes multiple social categories and that functions to keep people whole.

These narratives are focused, detailed, and individualized; they come from people traditionally labeled as "Other" on multiple dimensions. Thus, they are first-hand accounts of how the important social category systems actually work together. Integrating the insights of these narratives into carefully designed empirical studies may lead to an identity literature that sees people as whole.

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